



Connecticut Department of
Energy & Environmental Protection
Bureau of Natural Resources
Wildlife Division

Request for Natural Diversity Data Base (NDDB) State Listed Species Review

Please complete this form in accordance with the instructions (DEP-INST-007) to ensure proper handling of your request.

There are no fees associated with NDDB Reviews.

CPPU USE ONLY

App #: _____

Doc #: _____

Check #: No fee required

Program: Natural Diversity Database
Endangered Species

Hardcopy _____ Electronic _____

Part I: Preliminary Screening

Before submitting this request, you must review the Natural Diversity Data Base "State and Federal Listed Species and Significant Natural Communities Maps" found on the [DEEP website](#). Follow the instructions on the map or in this form's instruction document. These maps are updated twice a year, usually in June and December.

Does your site, including all affected areas, meet the screening criteria according to the instructions:

☐ Yes ☐ No

Enter the date of the map reviewed for pre-screening: _____

Part II: Requester Information

*If the requester is a corporation, limited liability company, limited partnership, limited liability partnership, or a statutory trust, it must be registered with the Secretary of State. If applicable, the company name shall be stated **exactly** as it is registered with the Secretary of State. This information can be accessed at [CONCORD](#).*

If the requester is an individual, provide the legal name (include suffix) in the following format: First Name; Middle Initial; Last Name; Suffix (Jr, Sr., II, III, etc.).

1. Requester Company Name*:

Name:

Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

E-mail:

By providing this email address you are agreeing to receive official correspondence from the department, at this electronic address, concerning this request. Please remember to check your security settings to be sure you can receive emails from "ct.gov" addresses. Also, please notify the department if your e-mail address changes.

Requester can best be described as:

☐ Business Entity ☐ Federal Agency ☐ Municipal govt. ☐ State agency ☐ Individual
☐ Tribe ☐ Other (specify):

Acting as (Affiliation), pick one:

☐ Property owner ☐ Consultant ☐ Engineer ☐ Facility owner ☐ Applicant
☐ Biologist ☐ Pesticide Applicator ☐ Other representative:

Part II. Requester Information (continued)

2. List Primary Contact to receive Natural Diversity Data Base correspondence and inquiries, if different from requester.

Company:

Contact Person:

Title:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

E-mail:

By providing this email address you are agreeing to receive official correspondence from the department, at this electronic address, concerning this request. Please remember to check your security settings to be sure you can receive emails from "ct.gov" addresses. Also, please notify the department if your e-mail address changes.

Part III: Site Information

This request can only be completed for one site. A separate request must be filed for each additional site.

1. SITE NAME AND LOCATION

Site Name or Project Name:

Town(s):

Street Address or Location Description:

Size in acres, or site dimensions:

Latitude and longitude of the center of the site in decimal degrees (e.g., 41.23456 -71.68574):

Latitude:

Longitude:

Method of coordinate determination (check one):

☐ GPS ☐ Photo interpolation using [CTECO map viewer](#) ☐ Other (specify):

2a. Describe the current land use and land cover of the site.

b. Check all that apply and enter the size in acres or % of area in the space after each checked category.

☐ Industrial/Commercial _____

☐ Residential _____

☐ Forest _____

☐ Wetland _____

☐ Field/grassland _____

☐ Agricultural _____

☐ Water _____

☐ Utility Right-of-way _____

☐ Transportation Right-of-way _____

☐ Other (specify): _____

Part IV: Project Information

1. PROJECT TYPE:

Choose Project Type: Choose Type From Dropdown List , If other describe: _____

2. Is the subject activity limited to the maintenance, repair, or improvement of an existing structure within the existing footprint? ☐ Yes ☐ No If yes, explain.

3. Give a detailed description of the activity which is the subject of this request and describe the methods and equipment that will be used.

4. Provide a contact for questions about the project details if different from Part II primary contact.

Name:

Phone:

E-mail:

Part V: Request Type and Associated Application Type

Check *one* box from either Group 1 or Group 2, indicating the appropriate category for this request.

Group 1. If you check one of these boxes, fill out Parts I – VII of this form and submit the required attachments A and B.

- ☐ Preliminary screening was negative but an NDDB review is still requested
- ☐ Request regards a municipally regulated or unregulated activity (no state permit/certificate needed)
- ☐ Request regards a preliminary site assessment or project feasibility study
- ☐ Request relates to land acquisition or protection
- ☐ Request is associated with a *renewal* of an existing permit, with no modifications

Group 2. If you check one of these boxes, fill out Parts I – VII of this form and submit required attachments A, B, and C.

- ☐ Request is associated with a *new* state or federal permit application
- ☐ Request is associated with modification of an existing permit
- ☐ Request is associated with a permit enforcement action
- ☐ Request regards site management or planning, requiring detailed species recommendations
- ☐ Request regards a state funded project, state agency activity, or CEPA request

If you are filing this request as part of a state or federal permit application enter the application information below.

Permitting Agency and Application Name: _____

State DEEP Application Number, if known: _____

State DEEP Enforcement Action Number, if known: _____

State DEEP Permit Analyst/Engineer, if known: _____

Is this request related to a previously submitted NDDB request? ☐ Yes ☐ No

Enter the previous NDDB Request Number(s), if known: _____

Part VI: Supporting Documents

Check each attachment submitted as verification that *all* applicable attachments have been supplied with this request form. Label each attachment as indicated in this part (e.g., Attachment A, etc.) and be sure to include the requester's name, site name and the date. **Please note that Attachments A and B are required for all requesters.** Attachment C (DEP-APP-007C) is supplied at the end of this form.

<input type="checkbox"/> Attachment A:	Overview Map: an 8 1/2" X 11" print/copy of the relevant portion of a USGS Topographic Quadrangle Map clearly indicating the exact location of the site.
<input type="checkbox"/> Attachment B:	Detailed Site Map: fine scaled map showing site boundary details on aerial imagery with relevant landmarks labeled. (Site boundaries in GIS [ESRI ArcView shapefile, in NAD83, State Plane, feet] format can be substituted for detailed maps, see instruction document)
<input type="checkbox"/> Attachment C:	Supplemental Information, Group 2 requirement (attached, DEP-APP-007C) <input type="checkbox"/> Section i: Supplemental Site Information and supporting documents <input type="checkbox"/> Section ii: Supplemental Project Information and supporting documents

Part VII: Requester Certification

The requester *and* the individual(s) responsible for actually preparing the request must sign this part. A request will be considered incomplete unless all required signatures are provided.

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief."	
Signature of Requester	Date
Name of Requester (print or type)	Title (if applicable)
Signature of Preparer (if different than above)	Date
Name of Preparer (print or type)	Title (if applicable)

Note: Please submit the completed Request Form and all Supporting Documents to:

CENTRAL PERMIT PROCESSING UNIT
DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

Or email request to: dep.nddbrequest@ct.gov

Attachment C: Supplemental Information, Group 2 requirement

Section i: Supplemental Site Information

1. Existing Conditions

Describe all natural and man-made features including wetlands, watercourses, fish and wildlife habitat, floodplains and any existing structures potentially affected by the subject activity. Such features should be depicted and labeled on the site plan that must be submitted. Photographs of current site conditions may be helpful to reviewers.

- ☐ **Site Photographs (optional) attached**
- ☐ **Site Plan/sketch of existing conditions attached**

2. Biological Surveys

Has a biologist visited the site and conducted a biological survey to determine the presence of any endangered, threatened or special concern species ☐ Yes ☐ No

If yes, complete the following questions and submit any reports of biological surveys, documentation of the biologist's qualifications, and any NDDDB survey forms.

Biologist(s) name:

Habitat and/or species targeted by survey:

Dates when surveys were conducted:

- ☐ **Reports of biological surveys attached**
- ☐ **Documentation of biologist's qualifications attached**
- ☐ **[NDDDB Survey forms](#) for any listed species observations attached**

Section ii: Supplemental Project Information

1. Provide a schedule for all phases of the project including the year, the month and/or season that the proposed activity will be initiated and the duration of the activity.
2. Describe and quantify the proposed changes to existing conditions and describe any on-site or off-site impacts. In addition, provide an annotated site plan detailing the areas of impact and proposed changes to existing conditions.

- ☐ **Annotated Site Plan attached**